Borough of Chesterfield.

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## ANNUAL REPORT

OF THE

## Medical Officer of Health

FOR THE YEAR

1951

JAMES A. STIRLING, D.S.C., M.B., CH.B., D.P.H., MEDICAL OFFICER OF HEALTH.



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### BOROUGH OF CHESTERFIELD

### HEALTH COMMITTEE, 1951.

THE MAYOR (Alderman G. W. Heathcote, J.P.)

Chairman—Councillor L. Heath.

Vice-Chairman—Councillor T. H. Boulton.

#### Members:

Alderman Miss F. Robinson, J.P.

- .. Smith.
- " Taylor.

Councillor Anderson.

- ., Mrs. Bennell.
- Boyce.
- " Collishaw.
- .. Gorman.
- .. Hancock.
- ., Radford.
- ., F. S. Short.
- " Weston.

Public Health Department, Town Hall, Chesterfield. September, 1952.

## To the Chairman and Members of the Health Committee of the Borough of Chesterfield.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to submit my Twenty-Third Annual Report on the Health and Sanitary Conditions of the Borough for the year 1951.

The Report has been drawn up in accordance with the requirements of the Ministry of Health.

A rather disquieting feature during the year has been the continued decline in the birth rate, which has been falling steadily since 1947, and this year has reached the lowest figure ever recorded in the Borough. As I said in my last year's Report, various factors can influence the birth rate, not the least of which is the fact that a large number of the post-war young married couples have been forced to share accommodation with their parents. Such conditions are inevitable during periods of housing shortages, but there is no doubt that they create social problems which tend to disturb family harmony and so produce conditions which, to say the least of it, are not conducive to the living of a happy, contented family life to which children contribute so much.

With regard to the prevalence of infectious disease, conditions have been generally satisfactory, except for the fact that the incidence of Poliomyelitis increased. This disease, by its nature, does rather tend to alarm the general public, but, in dealing with it, one has to put it in its proper perspective and ensure that the general life of the community shall go on as usual, and I must pay my tribute to the public of Chesterfield for the sane and commonsense way in which they backed up my efforts in this direction.

It is pleasing to report that during the year the Sheffield Area Mass Radiography Unit visited the Borough for the first time, when a survey was carried out at a large Engineering Works, and a survey for the Borough as a whole has been arranged to take place in 1952.

No outbreaks of food poisoning have occurred during the year, which, while satisfactory, does not give rise to complacency. Signs are becoming evident that the general public are becoming more hygiene conscious, but 24 great deal still remains to be done

in this direction. Local propaganda and effort are the best ways of dealing with this matter, and thanks are due to local firms, canteens and other similar bodies, for the willing co-operation given to the Department and for the way in which they have welcomed talks on hygiene given to their staffs by members of the department, and in this connection I must mention the valuable work of Mr. Drabble, the Chief Sanitary Inspector. One further important point I wish to make is that the final success of a Clean Food Campaign must ultimately rest with the general public, and it is no use their simply complaining to the Health Department unless they are prepared to play their part in exercising the necessary discrimination in their shopping.

A long enough time has now elapsed since the passing of the National Health Service Act to assess the effect of the transfer of the Part III Services to the County Council.

I still maintain that a progressive Local Authority like Chesterfield is best administered as an entity, but as long as the law remains as at present, I think that the next best thing is when the County Council gives wide decentralisation as has happened in Chesterfield. Most of the Part III Services are very local and personal in their nature and application, and my acting as Medical Officer of Health for the Borough and Area Medical Officer on the County Health Staff, with the consequent closest co-operation between the two departments concerned does give the best results.

By the courtesy and kind co-operation of Dr. J. B. S. Morgan, the County Medical Officer, a survey of the Part III Services of the National Health Service Act which operate in the Borough is included in this Report.

I have again to sincerely thank you, Mr. Chairman and Members of the Health Committee, for your unfailing support in all measures taken for the health of the community, and I am also greatly indebted to my colleagues in other departments for their continued co-operation and assistance.

In conclusion, I wish to express my sincere thanks to Mr. Drabble, Chief Sanitary Inspector, and Mr. Brown, Chief Clerk, for their valuable help in the compilation and writing of this Report, and also to place on record my appreciation of the loyal support given to me by the whole of my staff during the year.

I am, Mr. Chairman, Ladies and Gentlemen.

Your obedient Servant.

#### J. A. STIRLING.

Medical Officer of Health.

# Report of the Medical Officer of Health for the Year 1951

#### NATIONAL AND SOCIAL CONDITIONS.

The area of the Borough is 8,472 acres, and the population according to the Registrar General's estimate at mid-year, 1951, 67,820.

The number of inhabited houses according to the rate books at the end of the year was 19,506. The rateable value is £426,646, and the product of a penny rate, £1,706.

### Physical Features of the Area.

Chesterfield is built mainly on clay, but there are also areas of rock, shale and coal, rendering the whole drainage of the ground better than if wholly consisting of clay.

The lowest point in the Borough is about 200 feet above sea level. The highest altitude is 600 feet. The hills surrounding Chesterfield rise to over 1,000 feet in three places: 1,168 feet at Harewood Grange, 1,009 feet at Pudding Pie Hill, and 1,078 feet at Stonedge.

#### Social Conditions.

Chesterfield is the natural, social, commercial and shopping centre of the important coal mining, industrial and agricultural district of North-East Derbyshire. The estimated population of this district, including the Borough, is over 250,000.

The number and variety of the industries carried on in Chesterfield are considerable. The chief occupations of the inhabitants are coal mining, engineering, textiles, box making and the manufacture of surgical dressings.

#### VITAL STATISTICS.

Births.—937 births were registered in the Borough, giving a birth rate of 13.8, by far the lowest rate ever recorded, the previous lowest being 15.3 in 1934. The rate compares very unfavourably with that for England and Wales as a whole (15.5) and the County Boroughs and Great Towns (17.3). When the Registrar General's comparability factor of 0.97 is applied to the birth rate it becomes 13.38. In the years between the wars, the Chesterfield rate was always comparable with that for the Great Towns and invariably exceeded the rate for England and Wales, and the gradual fall in the birth rate since 1947 is, to say the least of it, rather disconcerting.

Still Births.—The still births numbered 29, giving a rate of 30 per 1,000 total (live and still) births, as compared with 16 still births and a rate of 14.89 in the previous year.

Deaths.—The number of deaths of Borough residents during the year was 839, representing a crude death rate of 12.4 per 1,000

population, as compared with 748 deaths and a rate of 11.0 in the previous year. When the rate is adjusted by the Registrar General's comparability factor of 1.09, the corrected death rate for the Borough becomes 13.51. Heart diseases (274) and Cancer (145) are mainly responsible for the increased number of deaths over the previous year. Other chief causes of death in 1951 were vascular lesions of the Nervous System (95), Pneumonia (53) and Bronchitis (50).

As regards ages at death, it is interesting to note that 556, or 66% of the total occurred in people over the age of 65 years, and, in fact, 306 of these were over the age of 75.

Full details of the causes and ages of death, and the Ward distribution, will be found in Appendices 6 and 7.

Infant Mortality.—There were 36 deaths of infants under the age of 1 year, giving an Infant Mortality rate of 38.4 per 1,000 live births, as compared with 37 deaths and a rate of 34.9 in the previous year. The rate for England and Wales in 1951 was 29.6, and that for the Great Towns, 33.9.

Appendix 8 shows the infant deaths from stated causes and at various ages, and it will be seen that 19, or 52% of the total, occurred in the neo-natal period (i.e., within the first 28 days of life), and of these, 14 occurred within the first week of life. Prematurity was the cause of the majority of the neo-natal deaths.

Maternal Mortality.—There was one death due to pregnancy in 1951.

#### GENERAL PROVISION OF HEALTH SERVICES.

#### Clinics and Treatment Centres.

Particulars of the Clinics and Treatment Centres in the Borough are given in Appendix 14. These are provided (a) by the Local Health Authority, the Derbyshire County Council, and administered by the Chesterfield Area Health Sub-Committee, (b) by the Borough Education Committee, and (c) by the Sheffield Regional Hospital Board.

Details of the work of the Local Health Authority Clinics and Centres will be found in the section of this Report dealing with the operation of Part III Health Services.

#### Ambulance Facilities.

The Ambulance Service in the town is provided by the Derbyshire County Council.

### Home Nursing.

A Home Nursing Service is provided for the Borough by the Derbyshire County Council, and particulars of the work of the Home Nurses will be found in the section of this Report dealing with the services in the town under the National Health Service Act.

#### National Assistance Act, 1948.

One case was dealt with under Section 47 of the National Assistance Act in which an Order was made for compulsory removal to hospital. The case was that of a man of advanced age who lived alone in appalling circumstances and who was infirm, ill and totally unable to look after himself. Every effort was made to persuade him to go into hospital voluntarily, but he was adamant in his decision "to die in his own bed". With the agreement and, indeed, the wish of his own doctor, an order was made for his removal to hospital, where he subsequently died before the expiry of the period of three weeks named in the Order.

Several other cases were investigated after reports from various sources, i.e., Welfare Officers, Health Visitors, W.V.S., Old People's Visitors and Private Practitioners. These were all satisfactorily dealt with either by persuasion to go voluntarily into hospital, by the provision of a Home Help and/or District Nurse, or by constant following up by a Health Visitor.

Sympathetic understanding is vitally necessary in these cases, especially so as, in most instances, they are cases of independent and mentally alert old people, and the fact that the day-to-day administration of the Part III Services under the National Health Service Act is carried out in the Health Department ensures a personal and local touch in dealing with them.

Under Section 50, the Local Authority is required to arrange for the burial of persons dying in the area where it appears that no arrangements have been or are being made. During the year, six such burials were arranged.

## Nursing Homes.

At the end of the year there were two Nursing Homes registered under Section 187-195 of the Public Health Act, 1936, one as a Nursing Home only, and one as a Maternity Home only, providing accommodation for 17 beds—11maternity and 6 others.

## PREVALENCE OF AND CONTROL OVER INFECTIOUS AND OTHER DISEASES.

Notifications of infectious disease dropped from 1,545 in 1950 to 850 in the year under review. This is almost entirely due to the fact that it was not a "measles year", there having been 570 fewer cases of Measles and a decrease of 170 notifications of Whooping Cough. Appendices 10 and 11 give the number of cases in age groups and also the Ward distribution.

Scarlet Fever.—138 cases of Scarlet Fever were notified, as compared with 148 cases in the previous year. The disease was mild in character with very few complications.

**Diphtheria.**—For the second year in succession, there were no cases of Diphtheria in the Borough, indisputable evidence of the value of immunisation.

Acute Poliomyelitis.—This virus disease became notifiable forty years ago, but the incidence remained very low until the year 1947, when it reached more or less epidemic proportions in the country as a whole. In Chesterfield, however, the incidence did not reach noteworthy proportions until the year under review, when there were 20 confirmed cases, 14 paralytic and 6 non-paralytic. One of the patients, an adult died during the year. The age distribution of the cases and the degree of paralysis and severity is shown in the following summary:—

									Pa	ıraly	tic (	Case	s						Pa	Non raly Case	tic
			No.						Со	ndit	ion	at th	ie en	d of	195	1					
Age Groups	of	Cas	ses	Ε	eatl	ns		ever		Pa	Mile or or Pares	sis		mple			Γota	1			
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Malc	Female	Total	Malc	Female	Total
1— 5 years	6	3	9	_	_	_	3	1	4	-	1	1	1	-	1	4	2	6	2	1	3
5—10 ,,	1	2	3	-	-	~	1	-	1	-	2	2	-	-	-	1	2	3	-	-3	-
10—15 ,, 15—20 ,,	2	_	2	-	-			-	-	-	-	-	-	-		-	-	-	2	-3	2
20_ 25	1	2	1 2		_	_	1	_	1		1	1	_	_		1	1	1			1
Over 25 ,,	2	1	3	1	_	1	1	1	2	-	-	-	-	-	-	1	1	2	E	-	-
Total	12	8	20	1	-	1	6	2	8	-1	4	4	1	-	1	7	6	13	4	2	6

The disease generally follows a seasonal course, and this was the case in the Borough, the distribution during the year being:—

February				 1
June	•••	••		 1
July				 2
August	• • •			 4
September				 2
October				 7
November				 2
December	• • •			 1
			•	
TOTAL	•••	•••		 20

Meningococcal Meningitis.—Four cases were notified during the year, one of which, a baby aged 21 months, proved fatal.

Measles.—343 cases were notified, as compared with 913 cases in the previous year.

Whooping Cough.—207 notifications were received, as against 377 in 1950. There were two deaths from this disease; both were infants under one year of age.

Puerperal Pyrexia.—2 cases occurred during the year, both in domiciliary confinements.

Influenza.—This is not a notifiable disease unless complicated by pneumonia, but from figures kindly supplied by the local office of the Ministry of National Insurance, it is possible to have some indication of the incidence of influenza.

The disease reached epidemic proportions in January and early February. 18 deaths were attributable to influenza—an unusually high mortality.

**Pneumonia.**—Coincident with the influenza outbreak, the number of cases of primary and influenzal pneumonia rose considerably, 126 notifications being received as compared with 66 in 1950. There were 53 deaths from all forms of pneumonia, 23 more than in the previous year.

**Tuberculosis.**—New cases of tuberculosis notified numbered 45 (42 respiratory and 3 non-respiratory). There were 20 deaths.

At the end of the year there were 339 names on the Tuberculosis Register, 251 relating to respiratory and 88 to non-respiratory patients.

Mass Radiography.—In June, 1951, the Sheffield Area Mass Radiography Unit visited the Borough for the first time, when a survey was carried out at a large engineering works in the town. There was a good response, 80% of the employees attending for miniature film examination. A survey for the Borough as a whole was arranged to take place in the middle of 1952, a report of which will be included in the Annual Report for that year.

#### SANITARY CIRCUMSTANCES OF THE AREA.

Water Supply.—The water supply of the Borough comes from Linacre Reservoirs and various pumping stations and, after purification and chlorination, is distributed from service reservoirs. In the Water Board's laboratory, chemical and bacteriological analyses are made at frequent intervals, in some cases daily, and bacteriological samples are examined at monthly intervals by the Public Analyst. The result of all analyses during the year under review has been satisfactory. The water supply is constant, the quantity adequate and the standard of purity satisfactory, and no plumbo-solvent action has been reported.

All the houses in the Borough have a piped supply, and no houses, therefore, receive their supply of water for domestic purposes from standpipes.

Mr. Boothman, the Engineer and Manager of the Chesterfield and Bolsover Water Board, has kindly given me the following report on the work carried out during the year:—

"The Hady automatic pumping station was brought into commission on the 18th January, 1951, to maintain a supply of water in the high areas in Calow and district, where there were formerly intermittent pressures.

Automatic proportioning chlorinators were installed on the Low and High level Linacre supplies in July and August respectively.

The water treament at Whispering Well was modified during the year, and at present chlorine is injected by a single automatically proportioning chlorinator, the residual being kept to the minimum amount compatible with a satisfactory standard of bacteriological purity.

The Water Board was reconstituted on the 1st October to include the Clowne Rural District. Relevant statistics relating to the new Board are:—

Area of Supply ... ... 60 square miles

Population Supplied ... 113,100

Average Daily Consumption ... 4,000,000 gallons

During the month of December, one of the two Barlborough Service Reservoirs was emptied, thoroughly cleaned, metal work repainted and refilled.

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New Watermains laid:—
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658	yards,	3-in.	diameter	 ٠١	
1,747	,,	4-in.	,•	 	Housing
25		5-in.	•		·
720		6-in.			

Watermains scraped and relined with bitumen:—

1,214	yards,	3-in.	diameter	 	Distribution
2,546	٠,,	4-in.	••		
1,945		6-in.	•	 	Mains

Watermains scraped and relined with concrete:-

2,495 yards, 14-in. diameter ... Linacre Trunk Mains

Swimming Baths and Pools.—There are one indoor swimming bath and two open-air swimming pools in the Borough, all of which are owned by the Corporation. The Health Department exercises supervision over these baths and samples are taken to ensure the satisfactory condition of the water.

Sewage Disposa!.—There have been no extensions, additions or improvements in connection with sewage disposal during the year.

Common Lodging Houses.—The Markham Municipal Hostel for Men, owned by the Corporation and controlled by the Health Committee, is the only Common Lodging House in the Borough.

This Hostel, with its accommodation totalling 120 beds, can be considered as making a valuable contribution to the social services provided by the Corporation for the less fortunate members of the community in that it provides comfortable quarters for many old-age pensioners and unemployed single men who have neither a home of their own nor relatives to look after their needs. Furthermore, it offers cheap lodgings for the lower-paid artisan class who visit the town for short periods in pursuit of their work.

The popularity of the Hostel, and the need for such an establishment, can be judged by the fact that throughout the year it has been occupied to over 81% of its capacity, and a large percentage of the residents have now become more or less permanent.

Whilst the Health Committee have always considered the needs provided by the Hostel as more important than the financial return, it is gratifying to know that this year, the first for a number of years, the Hostel has been self-supporting, whilst the charges for accommodation have been kept at a level which imposes no hard-ship on the occupants. This position is even more satisfactory considering the steep rise in maintenance costs which have occurred during the year.

### Prevention of Damage by Pests Act, 1949.

Success in the eradication of rats and mice in any area depends largely on the co-operation of the general public, and this has been well maintained in the Borough during the year.

There have been no additional reports of major infestations by these pests, due to the fact that the inhabitants are now becoming pest conscious, and do not wait until their premises have become heavily infested before reporting to the Department. This permits early remedial measures to be taken, with the resultant saving of time and the prevention of damage to both food and property. It is gratifying to be able to report that it has been unnecessary to invoke statutory action in any case during the year.

In addition to following up all complaints received and to the continued treatment of known "black spots", routine surveys have been made of all parts of the Borough by the Rodent Operative and the Sanitary Inspectors, and in addition, sewer treatments have been applied to various sections of the system in accordance with the policy suggested by the Ministry of Agriculture and Fisheries.

The total number of premises where action has been taken in the extermination of rats and mice was 218, of which 47 were business premises and 171 domestic premises and allotments. The treatment of these premises necessitated a total of 781 visits and the laying of 879 pre-baits and 536 poison baits. The majority of the infestations were of a very minor character and were completely cleared by a single treatment, as shown by post-baiting. Block treatments were applied in only three cases, and satisfactory results were obtained.

The treating of the sections of the Borough sewerage system involved the baiting of 118 manholes. There was no evidence to show very heavy infestation in any of the sewers treated.

# INSPECTION AND SUPERVISION OF FOOD. Milk Supply — Milk Register.

Number of Registered Milk producers in the Borough	48
Number of Registered Producers residing outside the	
Borough	30
Number of Retailers (not Producers) residing in the	
Borough	39
Number of Retailers (not Producers) residing outside the	
Borough	8
Number of Inspections of Dairies, Cowsheds and Milkshops	276

### Milk Supply.

The year has seen a further reduction in the retail sale of undesignated milk in the Borough, and the time would appear to be not far distant when the district will be accepted as a Specified Area. This has been brought nearer by the opening of a large and up-to-date pasteurising plant in the town, which has itself made a vauable contribution to the improvement of the quality and safety of the milk supply.

The urgent need for the furtherance of the Ministry of Agriculture and Fisheries' policy for the eradication of Tuberculosis from dairy Herds through the Attested Herd and Tuberculin Tested Herds Schemes still remains, as will be seen by the incidence of that disease in cows passing through the Corporation Abattoir during the year which, although showing a decrease on last year, still stands at 50%. There has been no indication from the Ministry of Agriculture, as the licencing authority, as to the progress of these schemes in the Borough during the year, but as far as can be ascertained, there are nine producers of Tuberculin Tested Milk and eleven producers of Accredited Milk. The estimated number of undesignated herds in the Borough is twenty-eight, a number of which ard producers only who sell their milk to the local dairy company, where it is heat treated.

All the milk supplied to children in the schools is now drawn from heat treated supplies.

Athough the supervision of milk production no longer rests with the Local Authority, the Health Department continues, within its limited powers, to keep a close watch on the milk supply, so as to ensure that it reaches the consumer as a safe and wholesome

commodity, and to this end, frequent samples are taken to test the compositional quality, keeping quality, and its freedom from communicable disease.

## Milk (Special Designations) Regulations, 1949.

Reference has been made to the increased public demand for milk of special designation, and this is shown by the increase in the number of applications for licences to retail such milk. The number of Dealers' Licences and Supplementary Licences to use the designations "Tuberculin Tested", "Pasteurised" and "Sterilised" issued during the year was 83, an increase of 22 on the previous year. There are, in addition, a number of producer-retailers, both inside and outside the Borough, who hold licences issued by the Ministry of Agriculture and Fisheries as the Licensing Authority, to use the special designation "Tuberculin Tested and Accredited" in respect of the milk sold by them in the Borough.

There is no doubt that public consciousness has at last been awakened to the importance of heat treatment as a safeguard to the milk supply, for it is found that an increasing number of dairymen who have previously been retailing loose milk from undesignated herds are applying for licences to sell pasteurised milk in addition, and in a number of cases the latter has finally ousted the former. No doubt some of the consumers who had an early prejudice to heat-treated milk have finally been won over by its enhanced keeping quality and the more hygienic way in which it reaches their homes.

#### Meat and Other Foods.

The Corporation Abattoir continues to be used by the Ministry of Food as the Central Slaughtering Establishment for the Borough and the surrounding Urban and Rural Districts, the total population served being approximately 250,000. In addition, a considerable amount of meat has been "exported" from the Abattoir to other large towns far removed from Chesterfield.

A total of 56,896 animals were slaughtered for human consumption, and all of these, with the exception of 109 cottagers' pigs slaughtered on private premises for home consumption, passed through the Abattoir. Although these figures approximate those of last year, the tonnage of meat they represent is considerably higher than any previous year, due to an increase of nearly 2,000 beef cattle slaughtered. It is to the credit of the Meat Inspectors that, despite the extremely heavy kills during the months from August to December, when the capacity of the Abattoir and the staff are taxed to the utmost, 56,887 carcases were inspected—only nine less than the total recorded kill.

The importance of this inspection is to be seen in the amount of meat and offals which it was found necessary to condemn as unfit for human consumption—a total of over 303 tons—which shows an increase of 111 tons over the previous year. These some-

what staggering figures add emphasis to the desirability of centralised slaughtering, which alone makes possible 100% inspection of cattle slaughtered for food.

Reference to Appendix 20, Tables 1 and 2, will show the number and types of animals slaughtered and the incidence of disease affecting them.

There has been a considerable decrease in the incidence of Tuberculosis in cattle other than cows slaughtered during the year, which has fallen from 27.7 per cent. to 17.9 per cent., and also a decrease in that disease in cows from 56.2 per cent. to 50.0 per cent. It may be that the Ministry of Agriculture's Tuberculosis eradication schemes are beginning to show results, but, recapitulating what was stated in the report of last year, the very high incidence of Tuberculosis in cows slaughtered suggests that it will be a very long time before the disease is finally eradicated from dairy herds. Apart from the wastage of meat and edible offals due to condemnation, which the country can ill afford at this time, there must also be a considerable depletion in the nation's milk yield from our dairy herds as a result of this high incidence of disease.

Whilst there has been a decrease in the incidence of Tuberculosis in calves, the number of cases of congenital Tuberculosis necessitating the condemnation of the whole carcase and offals has greatly increased. The department has continued to notify all such cases to the Animal Health Division of the Ministry of Agriculture and Fisheries so as to enable the Veterinary Inspectors to trace the infected calves back to their dams, and from reports received following this notification, about 60 per cent. of these have been so traced and the infected animals have been dealt with under the Tuberculosis Order.

It will be seen that the incidence of diseases other than Tuberculosis in all classes of animals slaughtered, with the exception of calves, shows substantial increases on the previous year. Parasitic infections of the livers of cattle and sheep were largely responsible for these high figures, but as condemnations from the cattle so affected were largely confined to the livers, the wastage was not so extensive as the figures might suggest.

The increase in fluke infestation may have been due to the wet seasons of the last two years. There has been a fairly considerable increase in the number of whole carcases condemned for various causes during the year, dropsy and emaciation being the principal causes. Condemnation for all causes other than Tuberculosis accounted for less than one-third of the total weight of meat and offals condemned.

In addition to the meat and offals condemned, a further 15½ tons of various foods have been condemned on the premises of traders; this shows an increase on last year's figures of approximately 4 tons. Imported canned cooked hams accounted for

almost 3 tons of this total, and as the whole of these hams, which must be classed as luxury foods, were imported, it was not possible to follow up the cause of this appalling waste which, based on the retail price, would represent a cash value of something approaching £5,000.

Of the total of over 318 tons of all foods condemned, as much as possible was utilised for technical purposes or converted for animal feeding.

## FOOD AND DRUGS ACT, 1938.

During the year, 272 samples of food and drugs have been submitted to the Public Analyst, of which 210 were formal and 62 informal samples. The samples comprised 191 milk and 81 other food and drugs.

Appendix 21 shows the number and the nature of the separate foods analysed.

Of the total samples taken, 17, or 6.2 per cent., were found to be not genuine or below standard, and of these, 16 were formal, 14 of milk, 1 of ice cream and 1 of meat paste, the remaining sample being an informal one of table jelly.

The average composition of all the milks sampled during the year was found to be as follows:—

Milk Fat ... ... ... 3.65 per cent. Milk Solids other than Milk Fat ... 8.67 per cent.

The samples of milk found to be not genuine were all deficient in milk fat, and six of them to be also very slightly deficient in milk solids other than milk fat. In twelve of these samples, the fat deficiencies were so small as to render legal proceedings undesirable, and as the freezing points of four of the milks found to be deficient in non-fatty solids were within the normal range for genuine milk, the presence of added water was negatived.

Of the two remaining samples, one obtained from a retailer—not the producer of the milk—was deficient in milk fat to the extent of 17.3 per cent., and in non-fatty solids to 6.1 per cent. The freezing point (Hortvet) was above the normal range for genuine milk and showed the presence of a small amount of added water; the quantity, however, was so small as to discount the possibility of wilful adulteration. An "Appeal to Cow" sample was taken from the herd of 28 cows on the premises of the farmer supplying the milk, this sample being genuine in that it contained 3.36 per cent. of milk fat and 8.68 per cent. of non-fatty solids. As the retailer undertook the bottling of his milk on the premises of the producer, he could not plead that the deficiency was due to neglect on the part of the producer. Legal proceedings were taken against the retailer in the Borough Magistrates' Court and, in pleading "Guilty", the retailer affirmed that there had been no abstraction from the milk, but the deficiency may have been due

to failure to mix the milk after it had been standing in the bottling machine before bottling commenced. A fine of £5 and £2 2s. 0d. costs was imposed.

In the second case, a sample of milk taken from a retailer receiving his milk as a sealed bottled supply from a producer outside the Borough was found to be deficient in milk fat to the extent of 16.6 per cent., and in non-fatty solids to 3.0 per cent., and by its freezing point to contain traces of added water, the latter being so small as to be discounted. Two "Appeal to Cow" samples taken from the herd of 18 Ayrshire cows on the premises of the producer proved on analysis to be milk of good quality, having a fat content exceeding 3.8 per cent.

Legal proceedings were taken against the retailer who, in turn, summoned the producer of the milk as the person responsible for the deficency. After hearing the evidence of both defendants, the Magistrates found the retailer "Not Guilty", but the producer to be "Guilty", and imposed a fine and costs amounting to £10 5s. 0d.

Of the other food samples, a formal sample of meat paste taken on the 13th June, 1951, from a retailer who was not the manufacturer of the product, was found to contain only 38 per cent. of meat as compared with a minimum of 50 per cent. required by the Meat Products and Canned Meat (Control and Maximum Prices) Order, 1948. An amendment to that Order, freeing meat paste from control both as regards price and composition, came into operation the day after the sample was taken, thus preventing any legal action being taken under the original Order. A severe warning was, however, given to the retailer.

A formal sample of ice cream taken from a producer-retailer was found to contain only 2.33 per cent. of fat, as compared with a minimum of 5.0 per cent. required by the Food Standards (Ice Cream) Order, 1951, the deficiency therefore being 53.4 per cent. Legal proceedings were instituted in respect of this sample, the defendant being found "Guilty" and a fine and costs totalling £14 4s. 0d. was imposed.

The remaining sample found to be below standard comprised an informal sample of table jelly which did not conform to the Setting Test of the Food Standards (Table Jellies) Order, 1949.

#### Milk Tested for Tubercle Bacilli.

Reference has been made earlier in this report to the incidence of Tuberculosis in cows passing through the Borough Abattoir, but it must be pointed out that comparatively few of the infected cattle mentioned would produce tuberculous milk. It is not now the duty of the Local Authority to supervise milk production, as all matters concerning both milk production and the health of dairy herds is vested in the Ministry of Agriculture and Fisheries. So long as this high incidence of disease continues, and until all the dairy herds in the Borough become supervised under the

Attested Herds or Tuberculin Tested Herds Schemes, this department is justified in taking all measures within its now limited powers to safeguard the purity and safety of the milk supply. It is assumed that the Ministry of Agriculture and Fisheries are taking the necessary samples from designated herds as provided for in the Regulation governing such herds, but it is by no means certain that undesignated herds are receiving similar attention, and it is in these herds where disease is most likely to be found. Having this in mind, the department has concentrated on the sampling of milk for biological examination from the undesignated herds in the Borough, and 36 such samples from that number of herds, representing a total of 438 cows, have been submitted to the County Bacteriologist.

Positive results were returned in one of these samples, which was obtained from a herd of nine cows. The facts were reported to the Ministry of Agriculture and Fisheries for an examination to be made of the herd to locate the infected animal. In the meantime, restrictions by Statutory Notice were placed on the sale of milk from the herd, requiring that the same be subjected to heat treatment before being sold for human consumption, until the supply was found to be non-infected. The notice was withdrawn in January, 1952, after a favourable report was returned by the Ministry's Veterinary Inspector.

#### Ice Cream.

The Ice Cream (Heat Treatment) Regulations, 1947, which have been only partially operative since their introduction, came into full operation in March, 1951. These Regulations laid down standards of practice in the manufacture and preparation for the sale of ice cream which go a long way towards ensuring the safety of this increasingly popular food.

Many of the smaller registered manufacturers have found it uneconomical to lay down the necessary plant and equipment to meet the requirements of the Regulations, and the total number of manufacturers in the Borough has now been reduced to eight. There has, however, been a further increase in the number of retailers selling ice cream in the pre-packed form; the number of such premises now on the register totals 172.

Local Authorities, having been successful in improving the standard of manufacture of ice cream, have been advocating the introduction of a legal standard of quality, but, owing to the shortage of ingredients following the war, the Ministry of Food has, until this year, found it impossible to fix such a standard. The Food Standards (Ice Cream) Order, 1951, which became operative on the 31st March this year, supplied the long looked-for standard and, by fixing a minimum fat content of 5 per cent. and a milk solid content of  $7\frac{1}{2}$  per cent., the Ministry has ensured a real food value to a commodity which, in a good many cases in the past, has been sadly lacking in nutriment.

Since the introduction of this new standard, the quality of ice cream sold in the Borough can be considered to be generally satisfactory, as shown by the average quality of six samples submitted to the Public Analyst for chemical analysis, which was 7.26 per cent. of fat and milk solids, and sugar above the prescribed minimum standard. One sample, however taken from a producer-retailer, was very deficient in fat, the sample containing only 2.33 per cent. as against the minimum of 5 per cent. required by the above Order, a deficiency of 53.4 per cent.

Legal proceedings taken in respect of this offence resulted in the defendant being fined £10, with £4 4s. 0d. costs.

Eighteen samples of ice cream submitted to the County Bacteriologist for the Methylene Blue test were classified as follows:—

12 samples. Grade 1 ... Satisfactory.
3 ,, 2 ... ,,
3 ,, 4 ... Unsatisfactory.

Special attention was given to the premises where the unsatisfactory samples were obtained and, on subsequent samples being taken, these reached the higher grade.

### Clean Food Campaign.

It is with pleasure, but with no complacency, that another year of freedom from any notification of food poisoning in the Borough can be reported. This seems to indicate that the food trades and the general public as a whole are becoming more hygiene-conscious in their preparation and handling of food. A further indication of this interest is the number of requests which have been received from various firms, from works canteens and from various social organisations in the town, for talks on this very important subject. The Chief Sanitary Inspector has given numerous talks to these bodies and all have been well received, and the discussions which have followed have given ample proof of the importance now being placed on clean food. Local propaganda of this type is more likely to produce results than the application of penalties through legislation, and it is gratifying to report the willing co-operation of the trading organisations in the town in this work.

Much, however, remains to be accomplished. Food trading in an open market leaves much to be desired, and constant attention is necessary to make up for the lack of facilities to practise hygienic principles more easily followed in permanent establishments. An open market is, of course, an asset to any town and is something of a tradition, but the exposure of food to dust and to the elements in the open streets presents potential dangers which are not easily overcome. Trading under these conditions, therefore, calls for greater diligence on the part of the tradespeople,

#### HOUSING.

During the year, a total of 280 new houses have been built in the Borough. Of these, 255 were erected by the Local Authority and 28, incuding 3 conversions, by private enterprise. As eight of the houses built by the Corporation were of the Duplex type, the total living units provided was actually 291.

Most of the bad cases of overcrowding in the Borough have been, or will in the near future be relieved, but it must be realised that, with post-war housing economies, it is not easy to erect the size of house required to re-house a few cases where there are, say, more than ten in a family. After the relief of overcrowding, the most urgent need is the provision of housing accommodation for many of the post-war married couples who have been forced to share living accommodation with their parents.

Until all the housing needs of the overcrowded have been met and houses are available for the young married couples referred to, there would appear to be little chance of Slum Clearance being possible on anything like the pre-war scale, and in the meantime there is progressive deterioration in those properties which were ripe for clearance at the outbreak of war.

During the year, Clearance Orders have been confirmed on three areas represented, and the twenty houses involved have been demolished and the tenants re-housed by the Corporation. The Ministry have not been able to increase the year's allocation of houses for re-housing of the tenants from these areas, and accommodation has had to be provided from the annual quota of houses granted to the Borough.

There still remain twenty-three areas which were represented to the Council for clearance before September, 1939, and on which action was held up by the outbreak of war, and some of these have now reached the stage where action can be no longer deferred.

The following shows by Ward incidence the houses erected by the Corporation and by private enterprise:—

		Newbold	West	Rother	Old Whitt.	Hasland	St. Helen's	Holmebrook	New Whitt.	Central	Trinity	Total
uilt by the Corporation	 •••	173		*80	_	2						255
uilt by Private Enterprise onversions	 	5	6	2 (1)	=	5	1	_	6	(1)	(1)	25 (3)
TOTAL	 	178	6	82		7	1	_	6			280

Figures in brackets indicate the number of conversions.

<sup>\*</sup> Includes 8 Duplex Houses, which together with the three conversions shown, give a total of 291 Living Units provided.

## NATIONAL HEALTH SERVICE ACT, 1946— PART 3 SERVICES.

The day-to-day administration of most of the Part III Services provided under the National Health Service Act is delegated to the Chesterfield Area Health Sub-Committee, which consists of six members of the Derbyshire County Council Health Committee and six members of the Borough Health Committee. This section of the Report summarises the work carried out in the Borough during 1951.

## SECTION 22.—CARE OF MOTHERS AND YOUNG CHILDREN.

#### Child Welfare Centres.

Six Child Welfare Centres are provided in the Borough, at which forty sessions are held each month.

1,964 infants and children made 22,732 attendances at all Centres during the year 1951. Of the total children attending, 754 were new attenders under the age of one year, representing 80 per cent. of the total number of babies born in the Borough during the year.

The following is a summary of the work done at the Centres during the year:—

during the year.		
Total number of Children attending the Centinumber of new attenders under 1 year of Number of new attenders aged 1 to 5 years		1,964 754 26
Total attendances made:—	14,690	
By Children under 1 year of age By Children over 1 year of age	8,042	
	22,732	
Ante- and Post-Natal Clinics.		
No. of Ante-Natal Clinics provided	2	
No. of sessions held per month	18	
New cases attending	723	
Total cases attending	851	
Total attendances made	3,214	
Post-Natal Clinics.		
No. of Post-Natal Clinics provided	2	

2 93

101

170

No. of sessions held per month

New cases attending Total cases attending

Total attendances made

### Artificial Sunlight Clinic.

Arrangements have been made for children under school age suffering from certain conditions to receive artificial sunlight treatment at the School Clinic. These children are referred from the Child Welfare Centres by the Assistant Medical Officers, and the treatment has proved particularly effective in cases such as malnutrition and debility of infants, bronchitis and certain other respiratory conditions.

During the year, 62 infants and toddlers received 397 treatments.

#### Dental Work.

The following tables indicate the work of the Dental Officer for the year:—

### Numbers Provided with Dental Care.

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers	7	7	7	_
Children under 5	287	279	264	22

#### Forms of Dental Treatment Provided.

	Extrac-	No. of General Anaes-	General or Silver	Dress-	Radio-	Dent ures Provided			
	tions	thetics Admini- stered	ings	& Gum Treat- ment	Treat- ment	ings	graphs	Com- plete	Par- tial
Expectant and Nursing Mothers	14	6	_	4	_			1	-
Children under 5	423	201		_	399	_		-	_

#### Care of Premature Infants.

Space is provided on the Notification of Birth Cards for the weight at birth when this is  $5\frac{1}{2}$ -lbs. or less. By this means, immediate information is obtained regarding premature babies, which is passed to the Health Visitors, who give special attention to these infants.

Special draught-proof cots with detachable linings, hot water bottles etc., together with suitable clothing, are available when premature babies are kept at home, and the domiciliary midwives visit twice a day as long as is considered necessary.

By arrangement with the Hospital Management Committee, a special Premature Infant Nursery is provided at the Scarsdale Hospital Maternity Unit.

64 premature infants were notified during 1951, of which 14 were born at home and 50 in hospital or nursing home.

#### Care of Illegitimate Children.

The arrangements for the care of the mother and her illegitimate child, which were made in the Borough under the Ministry of Health Circular 2866/1943, continued during the year.

Briefly, the arrangements are as follows:—

The Chief Health Visitor and the non-medical Supervisor of Midwives are mainly responsible for the care of illegitimate infants, with the result that, in most cases, the future of both mother and child is decided upon before the confinement. The Health Visitors pay special attention to these babies, and the Department as a whole works in close co-operation with the local Moral Welfare Association, the Borough Welfare Committee, the N.S.P.C.C. and other organisations.

The staff of the Department feel that the cases dealt with most satisfactorily are those where the mother is able to keep the child and live with the grandparents, and it is pleasing to report that, in a large majority of cases, this is the ultimate result.

The number of illegitimate births in 1951 was 43, representing a rate of 45 per 1,000 total births.

#### SECTION 23.—MIDWIFERY SERVICES.

The Midwifery Service in Chesterfield consists of Mrs. S. M. Street, the Supervisor, and an establishment of nine domiciliary midwives.

The following is a summary of the work of the domiciliary midwives during 1951:—

No. of Cases attended as Midwiv	es			391
No. of Cases attended as Matern				89
No. of Cases in which Gas and	d Air An	algesia	was	
administered				288
No. of Ante-Natal Visits				2,985
No. of Post-Natal Visits				6,655
No of Attendances at Ante-Nata	al Clinics			341
Records received from Midwives:-				
Medical Help				76
Still-births				5
Deaths of Mothers				_
Deaths of Children			• • •	3
Laying-out of the Dead				_
Liability to be a source of Infect	ion			_
Notification of Artificial Feeding				15

#### Notification of Births.

953 live births and 28 stillbirths were notified during the year.

#### Birth Control.

A special clinic, to which cases are sent on medical grounds for advice and for the supply of contraceptives, is held in conjunction with the Post-Natal Clinic.

#### SECTION 24.—HEALTH VISITING.

The establishment for the Borough is a Chief Health Visitor, Miss M. Langton, and seven Health Visitors, who are also School Nurses.

The duties of the Health Visitor are many and varied, which, besides being concerned with the care of mothers and young children, include the supervision and advising of all sick and disabled persons who may require such help, work in connection with the welfare of old people, the schemes for Care and After-Care and Prevention of Illness. They also make enquiries on behalf of Hospitals, Adoption Societies and other bodies.

The following are details of the visits made by the Health Visitors during the year. It should be noted that the summary excludes work done as School Nurses.

No. of first visits to infants under 1 year of age		950
No. of re-visits to infants under 1 year of age		3,996
No. of visits to children aged 1 to 5 years		9,317
No. of visits to expectant mothers		136
No. of re-visits to expectant mothers		108
No. of other visits (i.e., for Children's Officer and ca		
referred by Hospital Almoner, Adoption Society	ties,	
Care and After-Care, etc.)		1,632

#### SECTION 25.—HOME NURSING.

The District Nursing Service comprises Miss D. M. Crapper, the Superintendent, and eleven Visiting Nurses, who attend cases of any nature except certain notifiable diseases, and their duties include the nursing care of patients on their discharge from hospital.

## Summary of Work of Home Nurses, 1951.

No. of New Case Medical		•••	 	 873	
Surgical			 	 390	
Tuberculosis			 	 29	
Maternity			 	 2	
Miscarriages	or Al	bortions	 	 1	

o. of Visits paid		uic ivu	1303.			
General Nurs	sing	• • •	• • •		2,956	
Tuberculosis				 	1,072	
Post-natal				 	25	
Maternity				 	64	
Pneumonia				 	783	
Casual				 	83	
Observation				 • • •	148	
Chicken Pox				 	16	

#### SECTION 26.—VACCINATION AND IMMUNISATION.

During the year, 510 children, aged 0 to 5, and 88 children, aged 5 to 15, were immunised against Diphtheria. Of the total of 598 immunisations, 146 were carried out by private doctors. In addition, 746 children were re-immunised, 725 by the Local Authority staff and 21 by private doctors.

The following table shows the state of Diphtheria immunisation in the town as at 31st December, 1951:—

Born in year	 1951	1950	1949	1948	1947	1946- 1942	1941 <b>-</b> 1937	Total Under15
Number immunised	 12	379	511	637	748	4,659	3,983	10,929

Vaccination by General Practitioner.

	·			AGE G	ROUPS.	
			Under 1	1 to 4	5 to 14	
(a)	Primary Vaccinations		52	7	10	over 32
(b)	Re-Vaccinations		_	2	5	70
(c)	Cases reported because					
	actual or alleged compl	ica-				
	tions of vaccination		_	_	_	

## SECTION 28.—PREVENTION OF ILLNESS, CARE AND AFTER-CARE.

#### Tuberculosis.

The Health Visitors visit all new cases for the purpose of giving advice, both to the patients and contacts, and also patients who are being nursed at home and those who have been discharged from Sanatorium. A total of 582 visits were made in 1951. Actual nursing of home patients is carried out by the staff of the Home Nursing Service. Bed and bedding is available on loan in necessitous cases. On the recommendation of the Chest Physician, extra nourishment in the form of milk is supplied to patients suffering

from tuberculosis, free or at a reduced cost, in accordance with an income scale.

#### General.

The Hospital Almoners refer to the Department cases which, on discharge from hospital, require after-care. These are either treated by the District Nurse or supervised and advised by the Health Visitors.

During 1951, the District Nurses paid 6,396 visits to such cases, which included visits to 167 cases referred during the year.

The Health Visitors made 553 visits to patients referred by the Almoner, to old people and in connection with the admission of chronic sick to hospital.

Sick room equipment, such as bed pans, urinals, mackintosh sheeting, steam kettles, inhalers, air rings, bed cradles, etc., is available for loan when required for patients being nursed at home. Larger items, such as wheel chairs and crutches, are loaned in appropriate cases.

#### Health Education.

By the very nature of their duties, the medical and nursing staffs of the Department are constantly carrying out health education. In addition, talks on the health services and various aspects of health education have been given by medical members of the staff to Community Associations, Youth Clubs, Parent-Teacher Associations, Senior Schools and other organisations.

Books, leaflets and pamphlets dealing with all aspects of health education and prevention of disease are distributed through the Health Office, Welfare Centres and Clinics.

#### SECTION 29.—HOME HELP SERVICE.

At the end of the year there were eleven Home Helps on the panel, all part time.

During the year, the County Council increased the full fee payable for a Home Help to £5 0s. 0d. for a 40-hour week, but in very few cases was the full fee paid, as charges are assessed on an income basis. In some cases a very small fee was chargeable under the scheme of assessment, and in quite a number, particularly amongst old people, help was given without charge.

It will be seen by the summary of work done given below that a large number of cases dealt with was amongst old people, and it is in this group that the services of a Home Help are required for long periods. It is this factor that tends to increase the cost of the service; but even so, it is more economical to care for the old people in this way than in hospital or institution, besides the far greater value of the old folk retaining their independence and spending the evening of their lives in their own homes.

The Home Help Service is doing fine social work in so much as it plays a big part in promoting recovery from illness, in relieving anxiety for the breadwinner in cases of illness of the housewife and in maternity cases, and in giving a sense of security to the old and infirm.

The following is a summary of the work of the Service during 1951:—

	Mater- nity	Old People	Old & Sick	Others	Tuber-culosis	Total
No. of cases being assisted			4		1	5
1st January, 1951 No. of applications re-	_	- 0	4	_	1	5
ceived during year	34	4	45	109		192
No. of new cases assisted	28	4	38	49	_	119
Total number of cases						
assisted in 1951	28	4	42	49	1	124
No. of cases being assisted				_ 1		
at end of 1951	2	<del>-</del>	11	5		18

#### APPENDIX 1.

#### PUBLIC HEALTH STAFF.

## Medical Officer of Health and Borough School Medical Officer:

J. A. Stirling, D.S.C., M.B., Ch.B., D.P.H.

## Deputy Medical Officer of Health and Deputy Borough School Medical Officer:

P. W. Bothwell, M.B., Ch.B., D.P.H.

## Veterinary Surgeon to the Corporation (part-time):

W. King Clarke, M.R.C.V.S.

Public Analyst (part-time):

Hugh Childs, B.Sc., F.R.I.C.

## **Chief Sanitary Inspector:**

G. Drabble, C.S.I., Certified Meat Inspector

## Sanitary Inspectors:

W. Teasdale, C.S.I., Ccrtified Meat Inspector.

C. A. Wood, C.S.I., Certified Meat Inspector.

W. Roberts, C.S.I., Certified Meat Inspector.

G. D. Yates, C.S.I., Certified Meat Inspector.

T. Limbert, C.S.I., Certified Meat Inspector.

Chief Clerk: G. S. Brown.

#### Clerical Staff:

Miss J. Mashman.

R. Clark.

Miss A. Pike.

E. L. Treece.

Miss K. V. Waldron.

Mrs. H. Law (Housing Visitor)

Mrs. K. Dunin.

Miss M. Owens.

## APPENDIX 2.

## GENERAL INFORMATION.

Population (estimated)         67,820         Area (Acres)         8,472         Number of Inhabited Houses        19,506         Rateable Value        £426,646         Sum represented by a penny rate (gross)        £1,706
EXTRACTS FROM VITAL STATISTICS OF THE YEAR.
Live Births—Legitimate 471 425 11legitimate 29 12 937
Birth Rate per 1,000 of Population: 13.8. (corrected by Reg. General's comparability factor: 13.38)
Still Births—Legitimate 14 13 129
Rate per 1,000 Total Birth: 30.
Deaths M. F. Total  Death Rate per 1,000 of Population: 12.37  (corrected by Reg. General's comparability factor: 13.5)
Deaths from Puerperal Causes:
From Sepsis
Deaths of Infants under one year of age:
M. F. Total   Legitimate       23   12   36   36
Death Rate of Infants under one year of age:
All Infants per 1,000 live births 38.0 Legitimate Infants per 1,000 legitimate live births 37.9 Illegitimate Infants per 1,000 illegitimate live births 24.4 Deaths from Cancer (all ages) 145 Deaths from Measles (all ages) — Deaths from Whooping Cough (all ages) 2 Deaths from Diarrhæa (under 2 years) 2

## APPENDIX 4.

## BIRTH RATES.

	Chest	County Boroughs	England		
Year	No. of Births	Birth Rate	and Great Towns Birth Rate	and Wales Birth Rate	
1947	1,386	20.61	23.3	20.5	
1948	1,222	18.12	20.0	17.9	
1949	1,130	16.6	18.7	16.7	
1950	1,058	15.56	17.6	15.8	
1951	937	13.81	17.3	15.5	
			17		

## APPENDIX 5.

## DEATH RATES.

	Chest	County Boroughs	England and			
Year	No. of Deaths	Death Rate	and Great Towns Death Rate	Wales Death Rate		
1947	811	12.06	13.0	12.0		
1948	727	10.78	11.6	10.8		
1949	719	10.6	12.5	11.7		
1950	748	11.0	12.3	11.6		
1951	839	12.37	13.4	12.5		
			1			



APPENDIX 6.

Deaths of Chesterfield Residents in the year 1951, classified according to Disease and Age-Periods.

Cause of Death	Age Periods											
	0-1	1-5	5–15	15–25	25-45	45–65	65–75	75+	TOTAL			
Tuberculosis, Respiratory Tuberculosis, Other Syphilitic Disease Diphtheria Whooping Cough Meningococcal Infections Acute Poliomyelitis Measles Other Infective and Parasitic Diseases Malignant Neoplasm, stomach , , , lung, bronchus	_ _ _ _ _ _ _	- - - 1 - -		1 1 	3 - - - 1 - - 3 2	8 1 3 — — — 1 8 17 4	4 1 - - - - 9 3 4	1 - - - - - 8 3 2	17 3 3 - 2 1 1 - 1 25 26 12			
"" breast " "" uterus	- - 1 - - - - 7 1		1 1 - - - - -	- - - - - 1 - 1	11 - - 1 - - 1 - 1 1 1	2 15 1 16 33 2 23 2 7 7	6  24  2 33 35 11 43 9 4 12 19	1 20 1 45 30 12 79 14 6 25 17	9 71 2 4 95 99 25 150 25 18 53 50 10			
Other Diseases of Respiratory System Ulcer of Stomach and Duodenum Gastritis, Enteritis and Diarrhoea Nephritis and Nephrosis Hyperplasia of Prostate Pregnancy, Childbirth, Abortion Congenital Malformations Other Defined and Ill-defined Diseases Motor Vehicle Accidents All Other Accidents Suicide Homicide and Operations of War	1 2  5 15  1	2 - - - 3 - 1 - -	- - - 1 - 1 - -	- - - 1 - 1 1 -	1 3 - 6 2 1 4	1 3 - 3 - 10 - 3 1	3 3 1 6 — 13 1 4 —	3 - 3 1 - 29 - 5 1 -	7 3 15 1 1 9 73 6 15 6			
TOTALS	36	7	4	7	45	184	250	306	839			



APPENDIX 7.

The Deaths as they occurred in the Wards.

				is as ene	, occu,									
Cause of Death	Hasland	West	Rother	St. Leonards	Holmebrook	Central	Trinity	St. Helens	Moor	Newbold	Old Whittington	New Whittington	Transferable Deaths	TOTAL
Tuberculosis, Respiratory Tuberculosis, Other Syphilitic Disease Diphtheria Whooping Cough Meningococcal Infections Acute Poliomyelitis Measles Measles Measles Malignant Neoplasm, stomach Malignant Neoplasm, stomach Meningococcal Infections Malignant Neoplasm, stomach Malignant Neoplasm, stomach Malignant and Lymphatic Neoplasm Measles M	1 — — — — — — — — — — — — — — — — — — —		4 	1	- 1	- 1	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	2 — — — — — — — — — — — — — — — — — — —	1 1 1 - - - - 2 3 - - 1 8 13 2 12 2 12 2 1 5 - - - 1 - - - - - - - - - - - - - -	2 — — — — — — — — — — — — — — — — — — —	3 	2 — — — — — — — — — — — — — — — — — — —	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	17 3 3 - 2 1 1 - 1 25 26 12 9 71 2 4 95 99 25 150 25 18 53 50 10 7 3 15 1 1 9 73 6 15 6 1 839
TOTALS	49	76	105	60	00	45	63	32	00	99	)0	70	,,,	

Note.—Of the total deaths occurring in the Borough, 229 actually died in Institutions, i.e., Royal Hospital, 89; Scarsdale Hospital, 134; Penmore Hospital, 3; Walton Sanatorium, 2; Nursing Homes, 1. These deaths have been allocated amongst the various Wards.



### APPENDIX 9.

### CANCER DEATHS.

Year	No. of Deaths	Males	Females	Death Rate	Deaths from all causes	Percentage of Total Deaths
1951	145	81	64	2.1	839	17.3

# APPENDIX 10. NOTIFIABLE DISEASES DURING THE YEAR.

D	isease			Total Cases Notified	Cases admitted to Hospital
Smallpox	• • •		•••		-
Scarlet Fever	•••		• • •	138	78
Diphtheria	•••				_
Para-Typhoid				_	_
Puerperal Pyre	xia			2	
Cerebro-Spinal	Mening	gitis		_	
Erysipelas				9	
Acute Poliomy	elitis (Pa	ralyt	ic)	14	14
,, ,,			alytic)	6	6
Dysentery		• • •		1	1
Measles				343	12
Whooping Cou	igh			207	6
Pneumonia	•••			126	1
Meningococcal	Infection	on	•••	4	2
TOTA	ALS	•••	• • •	850	120

APPENDIX 11.

PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASES. Notified Cases, 1951.

Cases notified in whole District.	n's	1	2         7         13         11         74         25         3         2         1         -         6         5         2         8         2         7         9         12         17         25         10         35           -	67 113 100 101 261
	4 5 to to 5 10	11 74 2 3 10	100 101 251 37	
	1 2 2		44 67 113	
		To- der	138 2 - 2 - 9 - 9 - 126 - 126 - 126 - 141 - 144 - 6 - 6	850 4
	Disease.		Scarlet Fever  Diphtheria  Puerperal Pyrexia  Erysipelas  Dysentery  Measles  Cerebro-Spinal Fever  Whooping Cough  Meningococcal Infections  Meningococcal Infections  A.c Poliomyelitis (Para)  A.c Poliomyelitis (Para)	TOTALS

### APPENDIX 12.

### TUBERCULOSIS.

			1	NEW	CASI	ES	DEATHS			
Age Periods		Pulmonary		Non- Pulmonary		Pulmonary		Non- Pulmonary		
			M	F_	M	F	M	F	M	F
Under	l year			•••		• • •		•••		
1—5	years					1				•••
5—10	,,,				1				•••	• • •
1015	,,			1				• • •		
15-20	,,		1	1	•••	1				
20-25	,,		3	5			1			1
25—35	99		5	2	•••		1			
35-45	,,		2	2			1	1	•••	
4555	,,		7	2			2	1		
55—65	"		4	3			3	2		1
65 and	upwai	rds	3	1			5			1
Tota	ils		25	17	1	2	13	4		3

APPENDIX 13.

WARD DISTRIBUTION OF TUBERCULOSIS.

V	Vards			Notifications	Deaths
Hasland		•••	• • •	2	1
West	•••			3	
Rother		•••		9	5
St. Leonard's		•••		3	1
Holme Brook				1	1
Central	•••	•••		1	
Trinity	•••	•••		1	1
St Helen's	• • •	• • •		2	2
Moor		• • •		4	2
Newbold				8	2
Old Whittingto	n			8	3
New Whittingto		•••		3	2
ТОТА	LS	• • •		45	20

### APPENDIX 14.

### CLINICS AND TREATMENT CENTRES IN THE BOROUGH.

Name and Situation of Clinic.	Open on.
(1) Child Welfare Centres:	
(a) Town Hall Clinic	Monday, Wednesday, Thursday and Friday afternoons.
(b) Edmund Street Clinic	Monday and Wednesday afternoon.
(c) Methodist Schoolroom,  Jawbones Hill	Monday afternoon.
(d) Village Hall, Hasland	Tuesday afternoon.
(e) Methodist Schoolroom, Wellington Street	Tuesday afternoon.
(f) Gospel Mission, Old Road	Thursday afternoon.
(2) Ante-Natal Clinics:	
(a) Maternity Home Clinic, Holywell Street	Thursday morning and afternoon; Friday afternoon.
(b) Edmund Street Clinic	Tuesday afternoon.
	First, Third and Fourth Tuesday mornings in month.
(3) Post-Natal Clinics:	
(a) Maternity Home Clinic, Holywell Street	First Monday morning in month.
(b) Edmund Street Clinic	First Tuesday morning in month.

Appendix 14.—Clinics and Treatment Centres in the Borough—continued.

Situation of Clinic.	Open on.
(4) School Clinic, Town Hall.	
(a) Minor Ailment Treatment	Daily, mornings.
(b) Medical Inspection and Consultation	Wednesday and Friday mornings.
(c) Ophthalmic	
(d) Orthopædic	Surgeon: Fourth Tuesday in month, morning and afternoon.
	Nurses: Tuesday and Friday (morning and afternoon).
(e) Dental	Daily, by appointment.
(5) School Clinic, Edmund St.	
(a) Minor Ailment Treatment	Daily, afternoons.
(b) Medical Inspection	Monday and Wednesday afternoons.
(c) Dental	Daily, by appointment.
(6) Tuberculosis:	
Brimington Road Clinic	Monday, Tuesday and Thursday, from 9-30 a.m. to 11-30 a.m., and 2-0 p.m. to 4-0 p.m., except Second Thursday in month.
(7) Veneral Disease:	
Chesterfield Royal Hospital	Friday, 9-30 a.m. to 11-30 a.m., and 2-0 p.m. to 3-30 p.m.
	Males: Tuesdays, 5-0 to 7-0 p.m.; Fridays, 2-30 to 4-30 p.m.
	Females: Tuesdays, 2-30 to 4-0 p.m.; Fridays, 5-0 to 7-0 p.m.
	Daily Treatment Clinic at 10-0 a.m. and 5-0 p.m.

APPENDIX 15.

Table showing Types and Numbers of the various Sanitary Conveniences to Dwelling Houses in the Borough according to Wards.

				Houses Using		
Ward		Water	Waste Water Closets	Privies	Pails	Portable Dustbins
Hasland	:	1,487	2			1,490
Rother	:	2,984	25	2	ŀ	3,009
West	:	1,924	47	3	-	1,971
Central	:	902	55	1	ı	957
St. Leonard's	:	1,313	3	10	4	1,313
Holme Brook	:	1,385	87	1	l	1.472
Newbold	:	2,815	1	20	2	2,815
St. Helen's	:	913	2	11	9	905
Trinity	;	1,688	2	1	1	1,689
Moor	•	1,330	9	4	1	1,336
Old Whittington	:	1,377	I	4	ļ	1,377
New Whittington	:	1,042	1		3	1,042
		19,160	229	56	16	19,376

### APPENDIX 16.

# SANITARY INSPECTION OF THE AREA. showing the work carried out by the Sanitary Inspecto

Table showing the work carried out by the Sanitary Inspectors during 1951.

Complaints investigated			673
Nuisances found		•••	940
Nuisances abated		•••	776
Houses disinfected		•••	229
Visits to Infected Houses			95
Visits to Dairies, Cowsheds and Milkshops	· · · ·		276
Visits re Shops Act	•••		17
Visits to Premises where Foodstuffs are prepa	red and	sold,	
including Restaurant Kitchens	•••	•••	400
Visits to Offensive Trades	•••		12
Visits to Slaughterhouses			1,175
Visits to Market Stalls	•••		1,378
Visits to Manure Receptacles	•••		3
Visits to Common Lodging Houses			79
Visits to Houses-let-in-Lodgings		•••	2
Visits to Factories		•••	87
Visits to Drains to New Buildings	•••		455
Visits re Drains Tested by Smoke or Water		•••	586
Number of Re-inspections			2,299
Number of Miscellaneous Visits		•••	1,334
Number of Houses Inspected		•••	35
Number of Informal Notices		•••	793
Number of Statutory Notices			138
Visits to Bakehouses			75
Observations re Smoke		•••	53
Visits to Ice Cream Shops and Manufacture	ers	•••	44
Visits re Prevention of Damage by Pests Act			798

### APPENDIX 17.

# Total Record of Work carried out as a result of action taken by the Sanitary Inspectors.

Obstructed Drains Cleansed				•••	170
		•••			5
Drains Tested by Smoke and		•••	• • •	• • •	26
Inspection Chambers built or	-	•••	•••	•••	26
Gulley Traps fixed		• • •	• • •	•••	4
Defects in Drains repaired		•••	• • •	• • •	26
Sink Wastes repaired		•••	•••	•••	24
New Sinks fixed or defects re		• • •	•••	• • •	18
Rain Water Pipes repaired		•••	•••		65
Rain Water Pipes disconnecte					1
W.C. and Vent Pipes repaired	d	•••		• • •	17
Eaves Spoutings repaired					112
Privies converted into W.C.'s	•••				1
Water Closets repaired					150
Water Closets provided	•••				1
New Dustbins provided			•••		99
Dirty Closets cleansed					11
Dirty Premises cleansed					33
Houses made reasonably fit					141
Water in Cellars	•••				3
Urinals repaired or provided					4
Windows repaired					85
Damp Proof Courses inserted	in walls				1
Roofs repaired					165
Floors repaired					47
Doors repaired					32
Plastering repaired					126
Damp Walls repaired					84
Defective Fireplaces, etc., repa					134
Houses provided with Internal					_
Yards repaved					24
Yard or Footpath Surfaces rep					26
Accumulations of Refuse ren		•••	•••	•••	20
Nuisances from Fowls and oth		abated	•••	•••	7
Miscellaneous Defects remedi		acarea	•••	•••	68
Factory Contraventions	• • • • • • • • • • • • • • • • • • • •	•••	•••	•••	8
Defective Water Supply	•••		•••		3
Ventilation provided or impro		•••	•••		2
Ashpits replaced with Bins				•••	1
Proper Food Store provided	• • •	•••	•••	•••	1
Manure Pits provided or repai		• • •	•••	•••	1
Transfer his provided of Tepar		• • •	•••	•••	1

APPENDIX 18.

Table of Nuisances discovered and dealt with.

	No. of Inspections made by	No. of N Serv	Notices ed	No. of Nuisances abated with
	Sanitary Inspectors	Informal	Legal ·	or without Notice
Drainage:				
No disconnection of waste pipe	_	_	_	_
Defective waste pipe, traps, inlets				0.7
and drains	169	54	4	97
Drains obstructed	461	161	1	170
Closets and Ashpits:				
Defective privies, pail closets and				
ashpits Conversion of privies into W.C.'s	5	1	1	1
Conversion of waste water closets	_	_		
into W.C.'s		_	_	
Conversion of privies into pail				
closets	_	_		-
Defective Water Closets	307	99	6	150
Provision of Additional Water		,	1	
Closets		1 65	1 52	99
Provision of portable ashbins		65	32	11
Other Defects:	20	11		11
Paving of courts and yards	56	24	5	50
Roofs, eaves-spouts and down-				
spouts	523	152	31	342
Sinks	1 22	7	1	18
Insufficient Ventilation	6	2	<del>-</del>	2
Windows	129	41	4	85
Dampness		43	17	85
Water in cellars	9 5	3		4 3
Water supply	5	1		
Overcrowding	$\frac{}{37}$	13		15
Foul condition of houses	60	21	_	20
Offensive accumulations Animals improperly kept	28	8		7
Digation	11	_	-	
Smoke nuisances	28	4	-	4
Urinals	. 14	5		4
Nuisances not specified above	250	108	15	413
TOTALS	2,775	824	138	1,580

### APPENDIX 19.

### Premises and Occupations which can be controlled by Byelaws and Regulations.

The following Table shows the character and number of Premises in the Borough:—

Common Lodging Hou	ses			•••	1
Houses let in Lodgings	•••				2
Slaughterhouses					3
*Tripe Boilers	•••				2
*Gut Scrapers					1
*Tan Yards					1
*Tallow Melters					3
*Dealers in Rags and E	Bones	•••			4
Bakehouses		•••			36
Fried Fish Shops					53
Premises where Milk is	produced	l or sol	d		123
Factories of various kin	nds	•••	•••		295

<sup>\*</sup>Offensive Trades.

APPENDIX 20.

Meat Inspection, 1951. Table 1. Carcases Inspected and Condemned.

Pigs	3,941*	41	448	12	292	7.7
Sheep and Lambs	30,731	£ 58	2,658	, , , , , , , , , , , , , , , , , , ,	1	,
Calves	7,215	2 28	23	35	2	.51
Cows	6,011	139	2,200	386	2,623	50.0
Cattle, excluding Cows	8,998	57 6	3,374	79	1,540	17.9
	Number killed	All Diseases except Tuberculosis:  Whole Carcases condemned	Carcases of which some part or organ was condemned Percentage of the number inspected affected with disease other than Tuberculosis	Tuberculosis only: Whole Carcases condemned	Carcases of which some part or organ was condemned	

\*Includes 1 calf and 160 pigs killed on private premises for home consumption.

Table 2.

Carcases Inspected	В	easts	Ca	lves	S	heep	P	igs
At the Abattoir	15	,009	7	,215	30	,731	3	,832
At Farms, etc						<del></del>		109
TOTAL	15	,009	7	,215	30	,731	3	,941
Total Number o	f An	imals	kiiled	l			56,89	6
Number Inspecte	d						56,88	7
Food S	Surre	ndered	duri	ng Ins	pectio	on.		
At the Abattoir and				Ü				
•	Tons	Cwts.	Qrs.	Lbs.	Tons	Cwts.	Qrs.	Lbs.
Beef	148	13	0	19				
Veal	2	4	0	11				
Mutton	1	15	2	2				
Pork	3	6	1	2				
Offals	147	5	0	20	202		0	26
Surrandarad by Trad	250 1				303	4	0	26
Surrendered by Trade		— Cwts.	0	T ba	Tona	Cwts.	Qrs.	Lbs.
			Qrs.		1 0113	Cwis.	Q15.	LUS.
Canned Foods	7	18	0	$27\frac{1}{2}$				
Meat	1	6	0	193				
Bacon and Ham	3	15	3	83				
Fish & Fish Cakes	0	16	0	5				
Cheese	0	5	3	$10\frac{1}{2}$				
Fruit & Vegetables	0	3	2	8				
Bread & Confecty.	1	1	0	15				
Various Foods	0	4	0	18	15	11	0	01/2
				-	318	15	0	26 <del>1</del>

The following Table shows the results of Food Inspection annually for the last five years:—

Year	Visits to Slaughter- houses	Offa	seased ils four Human	d unfi	t for		al Wei od foun Human	d unfit	for
	 	Tns.	Cwts.	Qrs.	Lbs.	Tns.	Cwts.	Qrs.	Lbs.
1947	 1,096	140	16		15	152	8	1	16
1948	 99 <b>7</b>	106	5	1	9	120	5	0	10
1949	 1,138	122	9	0	21	133	18	0	4
1950	 1,143	192	0	2	3	203	11	3	17‡
1951	 1,175	303	4	0	26	318	15	0	26 <del>1</del> / <sub>2</sub>

## APPENDIX 21. FOOD AND DRUGS ACT, 1938.

#### No. not No. of No. Nature of Food Genuine Samples Formal Informal obtained Genuine or below standard Milk 191 190 177 14 Butter 7 7 7 Margarine 4 4 4 Cooking Fat 2 2 2 \_ 3 3 $\overline{3}$ Bacon S.F. Flour 3 3 3 Table Jelly 6 Fish Paste Fish Cakes 13 Sausages 13 13 3 Sauce 3 . . . S. and K. Pie... 1 1 2 Jam 2 3 Glacé Cherries 3 3 Beer ... 4 4 Lard ... 3 3 3 Pepper 1 1 Baking Powder Custard Powder Meat Paste ... 52 Ice Cream 6 5 Lemon Curd 2 Synthetic Cream Salad Cream ... Coffee Essence Mixed Pickles Candied Peel 2 Cream of Tartar Camphorated Oil Lic. Powder Comp. Pastry Ground Almonds

### Summary for the last Five Years.

272

210

62

255

17

Year		Number Genuine		Percen- tage	Prose- cutions	Amount of Fines and costs imposed
1947	247	232	15	6.07		_
1948	266	238	28	12.39	4	£383 2 0
1949	267	248	19	7.11	2	£11 2 0
19 <b>5</b> 0	283	256	27	9.54	2	£15 0 0
1951	272	255	17	6.2	3	£31 11 0

### APPENDIX 22.

### 1.—Factories.

The following Table shows the number of Factories on the Register at the end of the year:—

							Where Mechanical Power is used	Where Mechanical Power is not used
Building and	Wood	wor	king	g		•••	34	11
Foundries						•••	8	_
Brewing and	Aerat	ed	Wa	ters		•••	3	2
Potteries					•••	• • •	6	
Engineers							44	
Printing	•••			•••			12	_
Baking, Conf	ectione	ery	and	Oth	er Foods		45	6
Dressmaking,	Tailo	ring	an	d M	illinery		12	7
Surgical Dres	sings a	and	Вох	. Ма	king, etc.		8	_
Laundries					•••		6	
Transport							2	_
Boot and Sho	e Rep	airi	ng				6	2
Various						•••	54	27
							240	55

Visits to Outworkers' Premises ... 12

### 2.—Inspection of Factories.

·		Number of	
Premises	Inspections	Written Notices	Occupiers Prosecuted
Factories with mechanical power Factories without mechanical	64	10	_
power	23	1	_
Other premises under the Act			
	87	11	_

### 3.—Defects found in Factories.

	N	umber of De	fects	No. of Defects in
Particulars	Found	Remedied	Referred to H.M. Inspector	respect of which Prosecutions were instituted
Want of cleanliness	7	7	_	
Overcrowding	_		_	_
Unreasonable temperature	_		-	
Inadequate ventilation	1	_		
Ineffective drainage of floors	1	1	_	_
Sanitary Conveniences:				
Insufficient	2	2		_
Unsuitable or defective	9	10	_	
Not separate for sexes	2	1	_	_
Other offences	- 1	1	-	_
	22	22	_	

### APPENDIX 23.

### HOUSING.

The following is a tabulated statement of work done in regard to Housing in 1951:—

1.—Inspection of Dwellinghouses during the year.  (1) (a) Total number of dwellinghouses inspected for housing defects (under Public Health or Housing Acts)	269
(b) Number of Inspections made for the purpose	807
<ul> <li>(2) (a) Number of dwellinghouses (included under subhead (1) above) which were inspected and recorded under the Housing Consolidated Regulations. 1925 and 1932</li> <li>(b) Number of Inspections made for the purpose</li> </ul>	=
(3) Number of dwellinghouses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	22

(4) Number of dwellinghouses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	269
2.—Remedy of Defects during the year without service of formal notices.	
Number of defective dwellinghouses rendered fit in consequence of informal action by the Local Authority or its officers	233
3.—Action under Statutory, Powers during the year.	
(a) Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936:—	
(1) Number of dwellinghouses in respect of which notices were served requiring repairs	_
(2) Number of dwellinghouses which were rendered fit after service of formal notices:—	
(a) By Owners (b) By Local Authority in default of Owners	_
(b) Proceedings under Public Health Acts:—	
(1) Number of dwellinghouses in respect of which notices were served requiring defects to be remedied	56
(2) Number of dwellinghouses in which defects were remedied after service of formal notices:—  (a) By Owners (b) By Local Authority in default of Owners	59 —
(c) Proceedings under Sections 11 and 13 of the Housing Act, 1936:—	
(1) Number of dwellinghouses in respect of which Demolition Orders were made	1
(2) Number of dwellinghouses demolished in pursuance of Demolition Orders	
(d) Proceedings under Section 12 of the Housing Act, 1936:—	
(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	_
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	

APPENDIX 24.

Summary of Slum Clearance Programme up to 31st December, 1951.

		T To do not be in	70000			4	No. of	4	No. of	
	No. of	Underlakings Accepted	S Accepted	No. of	NO OF	No. of	Families	No. of	Honses	No. of
Form of Action Taken	Houses Officially Represented	To Recondition	To convert to other use	Persons to be Displaced	Houses Houses Demolished	rehoused by Local Authority	who found their own accommor- dation	provided by Local Authority	upon which action is not completed	Families not yet rehoused
72 Clearance Areas*	514	8	7	2,066	318	1,497	31	345	194	134
Individual Houses	360	35	30	1,339	ı	1,186	51	280	15	9
	874	40	37	3,405	318	2,683	82	625	209	140

\*Includes 26 Areas, comprising 147 houses, upon which action was not confirmed owing to the outbreak of war in 1939.

